

**STATE OF IOWA  
PROMISE JOBS  
WORK EXPERIENCE PLACEMENT PROGRAM  
COMPLETION DATA**

The following Promise Jobs work experience participant has completed three months of satisfactory job performance.

<i>Last Name</i>	<i>First</i>	<i>MI</i>	<i>Social Security Number</i>
<i>Department</i>	<i>Work Site</i>	<i>County Name/County Number</i>	
<i>Date Started</i>		<i>Date Completed</i>	
<i>Supervisor Signature</i>	<i>Phone Number</i>	<i>Date</i>	

**This information must be provided so that the Promise Jobs work experience participant will receive credit for being enrolled in the Work Experience Placement Program. Submit this form and a copy of the completed performance evaluation to the your department's personnel assistant.**

**Personnel Assistant: Please send this form and the performance evaluation to:**

Iowa Department of Administrative Services –  
Human Resources Enterprise  
Work Experience Program Coordinator  
Employment Bureau  
Hoover State Office Building  
Des Moines, Iowa 50319-0150  
(515) 281-6480

**PLEASE ADVISE THE PROGRAM ENROLLEE THAT THEY MAY  
SUBMIT A DAS-HRE APPLICATION AT THIS TIME.**